

SUNY DOWNSTATE MEDICAL CENTER

UNIVERSITY HOSPITAL OF BROOKLYN POLICY AND PROCEDURE

No. BLB-3

Subject: BLOOD BANK AGREEMENT TO
PROVIDE SUPPORT TO THE
CLINICAL SERVICES ON A
TIMELY BASIS

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The JC Standards: NPSG:2A, NPSG:2C, PI.10,
PC.16.40, CAP Transfusion Medicine TRM.30866

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Related Policies:
(BLB-1) Procedure for Ordering , Picking & Delivering
of Blood

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I. PURPOSE

The purpose of this agreement (required by the College of American Pathologists) is to facilitate a shared understanding concerning the following aspects of the transfusion service and the clinical services to which it provides transfusion support:

1. Routine turnaround time
2. STAT turnaround time
3. Emergency release turnaround time
4. Turnaround time for special products
5. Notification of delays
6. Transportation of blood products

II. POLICY

The Blood Bank policy is to try at all times to meet or improve upon its targeted turnaround time for availability of the blood products to the clinical services. Requesting physicians on the clinical services will be informed when sporadic delays are anticipated

in providing blood products for individual patients in their care. If a pattern of delay is noted, a root cause analysis will be performed by the Blood Bank and the causes corrected if possible. When that cannot be accomplished, a new, more realistic turnaround time will be selected, communicated to the involved clinical services and incorporated into the related protocol.

III. Turnaround Time for Red Blood Cell Orders:

1. A physician's or designee's order for type & screen and/or crossmatched red blood cells must be placed into the Cerner laboratory information system and in the patient's chart. A **REQUEST FOR BLOOD COMPONENTS** (the orange requisition) must be sent to the Blood Bank, along with an acceptable patient sample. Clarity in orders is essential. The orange requisition must contain the Cerner bar-coded label(s), component ordered, amount, physician/phlebotomist signature and date/time. All blood bank tubes must be bar-coded, signed and dated. The orange requisition must also be signed in the two designated places by the appropriate ordering and phlebotomy personnel.
2. Routine Availability: notifies Blood Bank personnel with a **REQUEST FOR BLOOD COMPONENTS** (the orange requisition).
 - A. Crossmatched packed red blood cells, with no special antigen selection or serological workup required, will be available at 2 hours from the time an acceptable specimen is received.
 - B. Units for which special antigen selection or serological workup is necessary may not be available for hours or even days after Blood Bank notification and receipt of an acceptable specimen. Time of availability will depend upon the complexity of the problem, the possible need for send-out to the regional reference laboratory, the availability of rare units, the need to borrow from other institutions or the need to order from a regional supplier. The Blood Bank will initiate and continue contact with the physicians caring for the patient, to update them as to the possible time of availability.
3. STAT specimens received from the Emergency Department (ED)-Availability: Packed red cells will be available in 45 minutes from the time an acceptable specimen is received, unless a serological workup is needed.
4. Emergency Release Availability: Packed red cells will be released before testing is completed. The requesting physician must fill in and sign the back of the **REQUEST FOR BLOOD COMPONENT** (the orange requisition), to indicate that the medical condition warrants the issue of red cells for transfusion before standard testing of the patient sample and/or units can be completed and to release the Blood Bank from the responsibility for any adverse patient reaction to the transfusion.

At the discretion of the requesting physician, red blood cells prepared under these conditions will be:

- A. Group/Type Specific; Immediate Spin Crossmatch- The patient is typed; ABO & Rh identical blood will be released on an immediate spin crossmatch, the antibody screen will be incomplete; the blood will be available within 15 minutes after an acceptable specimen is received.

- B. Group/Type Specific; Uncrossmatched- The patient is typed; and ABO & Rh identical blood will be released without crossmatching; blood will be available in 15 minutes after an acceptable specimen is received.
- C. Uncrossmatched Group O negative*- O negative red blood cells will be released; blood will be available in 5 minutes after an acceptable sample is received.

**Regional shortages may limit the availability of Rh negative red cells.*

IV. Turnaround Time for Frozen, Specially Phenotyped or Rare Red Blood Cell Orders:

1. A physician's or designee's order for crossmatched red blood cells must be placed into the patient's chart and the orange requisition must be sent to the Blood Bank along with an acceptable bar-coded patient sample. An order must be placed into the computer system.
2. A routine red blood cell crossmatch will not be performed until a physician or designee sends the orange requisition that notifies the Blood Bank that a transfusion is needed.
3. If, based upon the patient's serological history or current test results, the Blood Bank Director and/or the supervisory staff find it necessary to send the specimen to a regional reference laboratory, a member of the Blood Bank staff will inform the physician of the delay. Depending upon the serologic problem and/or the need for rare red blood cells units, it may be hours to days until appropriate red cell units are available.
4. The Blood Bank and/or the regional reference laboratory will decide if frozen, washed (deglycerolized) red blood cells are needed, rather than conventional liquid red cell units.
Frozen deglycerolized red cells usually are reserved for patients who require uncommon or rare red blood cell units or who have the potential to have severe reactions to constituents of plasma.
 - A. Frozen deglycerolized red blood cell units will be available at the Blood Bank within ≤ 12 hours after they have been requested from the supplier, reflecting the supplier staffing schedule and the time required to thaw, wash, transport and crossmatch them.
 - B. Since frozen deglycerolized red cell units have a 24 hour expiration time (which includes most of the ≤ 12 hours mentioned in IV.4 above), hospital staff must retrieve and transfuse them as soon as possible after notification of their availability by Blood Bank.

V. Turnaround time for Frozen Plasma, Platelets, Cryoprecipitate, Derivative and Other Orders:

1. A physician's or designee's order must be placed into the patient chart and delivered to the Blood Bank on the orange requisition. An order must be placed into the computer system.

2. All product/derivative requests (except from the Operating Room and/or as approved by Adult and Pediatric Hematology) must be reviewed and approved by Blood Bank Clinical Pathology resident. The Blood Bank will provide the pager number of the residents on call.
3. Once approved and assuming receipt of an acceptable specimen, the product/derivative order will be ready within 45 minutes after the phone call notifying the Blood Bank that transfusion is imminent, providing that there are no complications while thawing (if the component requires thawing).
4. Once STAT orders are approved, the Blood Bank Medical Director/Clinical Pathology, resident will call the Blood Bank. Assuming the receipt of an acceptable specimen, all thawed products will be available within 45 minutes and all other products/derivatives will be available within 15 minutes.
5. If products are needed in the Operating Room (OR), the nurse or the surgeon should call Blood Bank. At the time of the request, the number of units required must be indicated. Assuming the receipt of an acceptable specimen, all thawed products will be available within 45 minutes and all other products/derivatives will be available within 15 minutes. Products will be released one to two at a time minimize wastage and outdate.

VI. Turnaround Time for Special Product Orders:

1. A physician's or designee's order must be placed into the patient's chart and delivered to the Blood Bank on the orange requisition. An order must be placed into the computer system.
2. The Blood Bank may need to order additional or special products, e.g., platelets, CMV negative, leuko-reduced, irradiated. If the product is available from the supplier it may take at least 2 hours to transport it to the Blood Bank. If the product/derivative is not in stock, the supplier may require additional time to obtain it. The Blood Bank staff will give the physician the best estimate of time of availability, taking these factors into consideration.

VII. Transportation of Products from the Blood Bank:

1. The **REQUEST FOR BLOOD RELEASE** card and order in the computer are necessary for the dispensing of all products including platelets, frozen plasma, cryoprecipitate and derivatives including Rhlg. A messenger** may pick up the products. If any complications occur, the Blood Bank will notify the nursing/medical staff of the delay and will call them as soon as the product is available.
2. If more than two red blood cells or frozen plasma units, e.g., in therapeutic apheresis procedures, are needed in a location without a monitored Blood Bank refrigerator, they will be sent in a wet ice cooler. They should be left in the cooler until hung for transfusion, and will be adequately cooled as long as ice is present. The cooler and any untransfused units must be returned to the Blood Bank by the hospital staff as soon as there is no further need for the blood components and/or prior to complete melting of the ice, whichever occurs first.

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3. All unused blood products/derivatives must be returned to the Blood Bank within 30 minutes of issue whether or not in a wet ice cooler.

*** A messenger includes any designated person such as messenger service, a doctor, nurse, physician assistant, medical student, clerk, volunteer, etc.*

VIII. REFERENCES:

SUNY Downstate Medical Center UHB, Administrative Policies and Procedures (BLB-1)
NYS Department of Health Regulations, November 2007.

College of American Pathologist, Laboratory Accreditation Program,
Transfusion Medicine Checklist, 10/06. TRM.30866

American Association of Blood Bank Standards, 24th edition, 2006.

American Association of Blood Bank Technical Manual, 15th edition, 2005.

Date Reviewed	Revision Required (Circle One)		Responsible Staff Name & Title
	Yes	No	
11/30/07			Elizabeth Gloster, M.D., Blood Bank Director